### Express Mailing Label No. EV 380179618 US

Deket No. A8SC1669US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

applicants:

J. AUDY et al.

Examiner: P. Phu

Serial No.

09/770,543

Art Unit: 2631

Filing Date:

January 26, 2001

For: DIGITAL BLANKING CIRCUIT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

### AMENDMENT TRANSMITTAL

Sir:

Transmitted herewith is an amendment for this application. Applicant is a large entity.

## Fee for Claims

	Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	
TOTAL	12	21	0	18.00	0.00	
INDEP.	3	3	0	86.00	0.00	

If any additional fee is required, charge Account No. 11-1580. A duplicate of this transmittal is attached.

Respectfully submitted,

August 31, 2004

Steven C. Patrick

Registration No.40,341 Attorney for Applicant SEP 0 3 2004

Technology Center 2600

KOPPEL, JACOBS, PATRICK & HEYBL

555 St. Charles Drive, Suite 107 Thousand Oaks, California, 91360

Telephone: (805) 373-0060

# CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service via Express mail in an envelope addressed to: Mail Stop Amendment, Commissioner of

-11/12/2004-PBR PIJChts) 1900 15 old 15450, Alexandria, Virginia 22313-1450.

01 FC:1201

8/31/0H DA

Marianne Middleton

# BEST AVAILABLE COPY

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PATENT APPLICATION FEE DETERMINATION RECORD  • Effective October 1, 2000  O9/770543												
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS		24					TE	FEE	1	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASI	C FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			21 minus 20=		* <i>i</i>		X\$	9=		OR	X\$18=	12
INDÉPENDENT CLAIMS . & minus			nus 3 =	•	/	X4	0=		OR	X80=	<i>,</i>	
MULTIPLE DEPENDENT CLAIM PRESENT						+13	35=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						<u> </u>	TAL		OR	TOTAL	72g	
S/31/01 CLAIMS AS AMENDED - PART II							OTHER THAN					
	/ /	(Column 1) CLAIMS		(Colur		(Column 3)					SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	.21	Minus	2	/	=	X\$	9=	ОЯ	OR	X\$18=	
AME	Independent	AITATION OF AN	Minus	··· Z		=	X4	0=		OR	X80=	86
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+13	5=		OR	+270=	
,. ·					ŌTAL		OR	TOTAL ADDIT, FEE	86.			
		(Column 1)	• .	(Colur	nn 2)	(Column 3)	ADDIT	. PEE			ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL' FEE
NDN	Total	•	Minus	••		=	X\$	9=		OR	X\$18=	
AME	Independent	NTATION OF M	Minus	***	CI AINA	=	X4	0=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+13	5=		OR	+270=	
							ADDIT	FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER OUSLY	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=	X\$	9=		OR	X\$18=	
	Independent	·	Minus	***	T CLAMA		X4	0=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+13	5=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FOR									00	TOTAL		
•••	""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Application or Docket Number